

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>19</i>	<i>5/30/01</i>
FORMALITY REVIEW	<i>T2</i>	<i>947</i>	<i>07/05/01</i>
RESPONSE FORMALITY REVIEW			<i>10/02/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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*400/01*  
*361*  
*12-1*